



STATE OF MARYLAND  
 MARYLAND DEPARTMENT OF LABOR  
 PROFESSIONAL LICENSING BOARDS  
**MARYLAND BOARD OF ARCHITECTS**  
 100 S. Charles Street, Tower 1, Baltimore, MD 21201  
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 FAX (410) 962-8483  
[dloplboardofarchitects-dllr@maryland.gov](mailto:dloplboardofarchitects-dllr@maryland.gov)

<b>DO NOT WRITE IN THIS SPACE OFFICE RECORD</b>	
RECEIVED CARD:	_____
APPLICATION NO:	_____
STAFF INITIALS:	_____

**APPLICATION FOR ARCHITECTURAL REGISTRATION EXAMINATION (ARE)  
NO FEE REQUIRED**

**CANDIDATES FOR EXAMINATION MUST BE ENROLLED IN ARCHITECTURAL EXPERIENCE PROGRAM (AXP) PRIOR TO FILING THIS APPLICATION. APPLICANTS WILL BE NOTIFIED OF THE BOARD'S DECISION WITHIN SEVEN BUSINESS DAYS OF THE NEXT BOARD MEETING FOLLOWING THE SUBMISSION OF THE APPLICATION. APPROVED APPLICANTS WILL RECEIVE FURTHER EXAM INFORMATION FROM THE NATIONAL COUNCIL OF ARCHITECTURAL REGISTRATION BOARDS (NCARB).**

**I. PERSONAL DATA**

Name \_\_\_\_\_  
Last Name on transcript if different

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\_\_\_\_\_ First Middle (If you do not have a middle name enter "N.M.N.")

Home Address \_\_\_\_\_  
Street and Number

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City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Personal Telephone No. \_\_\_\_\_ Business Telephone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
MONTH DAY YEAR City State Country

Social Security No. \_\_\_\_\_ (If you do not have one, please contact the Board)

Have you completed AXP: YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, date completed \_\_\_\_\_

If not completed, enrollment date: \_\_\_\_\_

**(NOTE: To qualify for early eligibility, you must be enrolled in AXP.)**

**II. CONDUCT QUESTIONS**

- Have you ever been convicted of a felony or misdemeanor in any State or Federal Court? YES NO  
 If you answered "yes", please submit a letter giving a complete explanation of the circumstances along with a true test copy of the applicable court document(s).
- Have you ever had an occupational or professional license, or exam application denied by Maryland or any other jurisdiction? YES NO  
 If you answered "yes", please submit a letter giving a complete explanation of the circumstances.

**III. WORK EXPERIENCE DOCUMENTATION**

**INSTRUCTIONS**

- (1) In order for the applicant to establish to the satisfaction of the Board that an applicant is a person of good moral character the applicant shall submit with this application, **three (3) LETTERS OF REFERENCE**. These letters must not be from a relative and should contain the following information:
  - Relationship to applicant.
  - Number of year’s person has known the applicant.
  - Whether or not the applicant is of good moral character.
  - Further comments and recommendations.
- (2) All first-time candidates must be enrolled in the AXP prior to filing this application. The completed application, including official sealed transcript(s), NCARB-issued verification of enrollment in an AXP, three (3) letters of character reference, and, if necessary, the appropriate ERC forms – Experience Record Certifications.
- (3) Applicants filing with a five (5) year NAAB accredited Bachelor of Architecture, a NAAB accredited Master of Architecture as a first professional degree, or a foreign architectural degree approved by Education Evaluation Services for Architects (EESA) **do not** have to complete the chart below.
- (4) Applicants filing with a four-year B.S. in Architecture degree; other degrees or no degree, i.e. experience alone, **must** complete the chart below showing the years of work experience that you are using to equate to education credits (see the Equivalency Matrix on page 4 of this application). Applicants must be enrolled in the AXP **before** applying. Work experience used for AXP cannot be used to fulfill the educational requirements.

**List most current employment first and sequence back. Applicant shall secure and forward to the Board a separate ERC form (see attached) from each employer listed below.**

Full Name and Complete Current Address of Employer  Designate if the office was that of a registered architect (RA)  If the office was other than that of a registered architect, state business.	Dates of Employment Give Month and Year	Total Time Employed		Indicate kinds of work engaged in for each employer												
				* Part Time	Full Time	Site Planning	Architectural Design	Working Drawings	Coordination of Structural Design	Coordination of Mech. or Elect.	Specification Writing	Cost Estimating	General Supervision	Administration	Client Contact	**Other Explain Below
		Years	Months	Years	Months											
	From	Years	Months	Years	Months											
	To	Months	Months													
	From	Years	Months	Years	Months											
	To	Months	Months													
	From	Years	Months	Years	Months											
	To	Months	Months													
	From	Years	Months	Years	Months											
	To	Months	Months													

\* If part time work is noted, state average number of hours per week.

\*\* If “other” kinds of work are noted, describe work.

**IF NEEDED, ATTACH ADDITIONAL SHEETS**

**IV. EDUCATION**

TRANSCRIPTS: Applicant shall furnish to the Board a complete official grade transcript (photocopies & "Issued to student" transcripts not acceptable) from the architectural college attended showing completion of required work and grades achieved, degree, and date of award. (The Board is interested in advanced degree, but transcripts leading to a professional architectural degree are most essential.)

SCHOOLS AND COLLEGES:

Colleges, Universities, Technical Schools attended	Dates of Attendance	Type of Degree Conferred/Date	
Currently enrolled in NCARB Integrated Path to Architectural Licensure (IPAL) Program	Yes	No	

ADDRESS

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS

**V. CERTIFICATION**

"I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF." I further authorize the release of any information contained within this application to an authorized representative of the Maryland Department of Labor for further investigation.

Signature of Applicant \_\_\_\_\_ Date Signed \_\_\_\_\_

In accordance with Executive Order 01.01.1983-18, the Maryland Department of Labor is required to advise you as follows regarding the collecting of personal information: Personal information requested by the licensing agency of the Department is necessary in determining your eligibility for licensure. Such personal information is also intended for use as an additional means of verifying the licensee's identity or to enable the agency to communicate, in a timely manner, with the licensee should the need arise.

The licensee has a right to inspect his/her personal record and to amend or correct the personal data if necessary. Personal information is generally available for inspection by the public only in accordance with the Public Information Act. Personal information is not routinely shared with state, federal or local government agencies.

## EDUCATIONAL REQUIREMENTS

A. To qualify for a license, an applicant shall meet the educational requirements set forth in Business Occupations and Professions Article, §3-303(c), Annotated Code of Maryland, including a foreign architectural degree approved by Education Evaluation Services for Architects (EESA).

B. If an applicant does not meet the professional education degree requirements referenced in the preceding paragraph, an applicant shall comply with the education requirements by either work experience or academic training, or a combination of both, in accordance with the following Education Equivalency Matrix:

### EDUCATION EQUIVALENCY MATRIX

For early exam eligibility, a candidate using the Education Equivalency Matrix should complete the education requirements before completing the Architectural Experience Program (AXP) requirements.

TYPE OF DEGREE OR EDUCATIONAL EXPERIENCE (See Note 1)	WORK EXPERIENCE FOR EDUCATIONAL EQUIVALENCY (See Note 2)
FULL-TIME ACADEMIC TRAINING TOWARD A FIRST OR SECOND PROFESSIONAL ARCHITECTURAL DEGREE ACCREDITED AS FOLLOWS:	
Complete 1 academic year in NAAB professional program	8.5 years — separate from experience used for AXP
Complete 2 academic years in NAAB professional program	7 years — separate from experience used for AXP
Complete 3 academic years in NAAB professional program	5 years — separate from experience used for AXP
Complete 4 academic years in NAAB professional program	4 years — separate from experience used for AXP
BS OR BA IN ARCHITECTURE (Foreign degree equivalent to US Degree, as determined by the Board; or by evaluation service such as WES, etc.)	4 years — separate from experience used for AXP
BS OR BA IN ENGINEERING, LANDSCAPE ARCHITECTURE OR INTERIOR DESIGN	5 years — separate from experience used for AXP
BS OR BA IN OTHER DISCIPLINE (including B.F.A.)	6 years — separate from experience used for AXP
AAS from a community college (See Note 3)	10 years — separate from experience used for AXP
None (Or foreign degree without US evaluation)	10 years — separate from experience used for AXP

1. Combinations of Educational Experience not explicitly stated in the Education Equivalency Matrix shall be considered on a case-by-case basis by the Board.

2. Work experience shall be directly related to architectural work and be completed under the direct supervision of a licensed architect. The work experience shall be full-time, a minimum of 40 hours per week. The work experience shall be completed in the office of a licensed Architect except that 80% of the required work experience may be completed as an employee of an organization other than the office of a licensed Architect if the work experience is directly related to architectural work and is completed under the direct supervision of a licensed Architect. All work experience must be documented on the Board's ERC Forms.

3. No credit is given.

# FORM ERC

## EXPERIENCE RECORD CERTIFICATION

The following information is required from each of the applicant's Employers. Use separate forms for each employer. Additional copies of this form should be made, as needed.

Applicant's Name \_\_\_\_\_

Date of employment (give month and year), from \_\_\_\_\_ to \_\_\_\_\_

Check: FULL TIME  or PART TIME  (If part time, average number of hours per wk = \_\_\_\_\_)

FULL TIME employment shall be measured in forty (40) hour week. PART TIME employment, state average number of hours per week

KIND OF WORK	INDICATE PERCENTAGE OF TOTAL TIME FOR EACH KIND	KIND OF WORK	INDICATE PERCENTAGE OF TOTAL TIME FOR EACH KIND
Renderings	_____	Full Size Details	_____
Tracing	_____	Checking Shop Drawings	_____
Design	_____	Observation of Construction	_____
Preliminary Sketches	_____	Client Conferences	_____
Working Drawings	_____	Structural Design	_____
Writing Specifications	_____	Mechanical Design	_____
Large scale Details	_____	Electrical Design	_____
<b>TOTAL:</b>	_____	<b>TOTAL:</b>	_____

Types of Projects/Buildings on which work performed:

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## CERTIFICATION OF APPLICANT'S EXPERIENCE RECORD

**APPLICANT'S NAME:** \_\_\_\_\_

Does applicant possess adequate technical knowledge? If NO, explain.

\_\_\_\_\_  
\_\_\_\_\_

Has applicant's experience been of satisfactory grade and character? If NO, explain.

\_\_\_\_\_  
\_\_\_\_\_

What is applicant's reputation in the profession of architecture?

\_\_\_\_\_  
\_\_\_\_\_

Other Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Type or print name of architect under whose direction work was performed

Name \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Business Phone No. \_\_\_\_\_

Registration Number \_\_\_\_\_

State of Registration \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Imprint or stamp below Architect's seal under whose direction work has been performed.

